APPLICATION FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD (FID) OR LICENSE TO CARRY FIREARMS OR LICENSE TO POSSESS A MACHINE GUN

IT IS THE RESPONSIBILITY OF THE LICENSI TRUE AND ACCURATE, AND IN THE CASE C NUMBER.				
IF RENEWAL ORIGINAL TRACKING NU		NEW LTC OR FID NUMBER		
F () 9 Digit License Number]	F ()9 Digit License Numb	
¹ THE ORIGINAL TRACKING NUMBER I CONTROL ACT OF 1998, WHICH WENT I	NTO EFFECT ON OCTO	OBER 21, 1998.		
*********	**********	*****	*****	******
PLEASE COMPLETE THIS APPLICATION F DEPARTMENT). <u>DO NOT MAIL TO THE FIRE</u>			LICENSING AUTHORITY. (LOC	AL POLICE
PLEASE CHECK ONE:				
[] NEW APPLICANT				
[] RENEWAL – MOST RECENT LICENS	E TO CARRY/FID CARI	D NUMBER	DID A TION DATE	
ISSUED FROM WHICH CITY/TOWN?_		, MA EX	PIRATION DATE	
CHECK THE TYPE OF LICENSE YOU ARE AP [] FIREARMS IDENTIFICATION CARD REST		SPRAY) [] CHECK IF CLASS A CLUB LIC	ENSE *
FIREARMS IDENTIFICATION CARD	`	*	NOTE: ONLY THE COLONEL OF THE	;
[] CLASS B LICENSE TO CARRY FIREARMS			AASSACHUSETTS STATE POLICE CA	N ISSUE A
[] CLASS A LICENSE TO CARRY FIREARMS [] LICENSE TO POSSESS A MACHINE GUN	S LARGE CAPACITY	C	LUB LICENSE.	
1. TWO PHOTOGRAPHS ARE REQUIRED F	COD LICENSING IF VOLU	HAVE ANV OHES	TIONS DI EASE CONTACT VOLID	LOCAL
POLICE DEPARTMENT.	OR LICENSING, IF TOO	HAVE ANT QUES	HONS, I LEASE CONTACT TOOK	LOCAL
2. IF APPLICATION IS FOR FIRST FID OR L' COURSE CERTIFICATE MUST BE ATTA			CERTIFICATE OR HUNTER SAF	ETY
3. IF ISSUED FOR EMPLOYMENT PURPOS ISSUANCE AND REASON MUST ACCOM			PANY LETTERHEAD REQUESTIN	NG
(EXCEPT FOR SIGNAT	TURE, PRINT OR TYP	E ALL REQUES	TED INFORMATION)	
CITY/TOWN OF:	, MA			
,			,	
LAST NAME	FIRST NAME		/ MIDDLE NAME	
	THOTTME		MBBELTMAE	
DEGIDENTIAL ADDREGG (L. 1. 1. N 1 G)	(C: /T		/()).FD
RESIDENTIAL ADDRESS (Include Number, Stre	eet, City/Town, Zip Code)		TELEPHONE NUME	BEK
			/()	
IF CLUB LICENSE ADDRESS OF CLUB (Includ	le Number, Street, City/Tow	n, Zip Code)	TELEPHONE NUME	BER
/		/		
DATE OF BIRTH PLACE OF BIRTH	MOTHER'S MAIDEN N	AME	FATHER'S FULL NAME	
ET IN /	1	/	/	
FT IN / / HEIGHT WEIGHT BUILD	/ COMPLEXION	HAIR COLOR	/ EYE COLOR	
OCCUPATION	C C NILIMDED (Optional)	DRIVER'S LICENSE NUMBER	
OCCUI ATION	S. S. NUMBER (Орионату	DRIVER S LICENSE NUMBER	
/			/()	
EMPLOYED BY (SEE # 3 ABOVE)	ADDRESS		TELEPHONE NUMBER	

WARNING

ANY PERSON WHO KNOWINGLY FILES AN APPLICATION CONTAINING FALSE INFORMATION SHALL BE PUNISHED BY A FINE OF NOT LESS THAN \$500 NOR MORE THAN \$1,000 OR BY IMPRISONMENT FOR NOT LESS THAN 6 MONTHS NOR MORE THAN 2 YEARS IN A HOUSE OF CORRECTION, OR BY BOTH SUCH FINE AND IMPRISONMENT (M.G.L. c.140, § 131).

	EASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY: ACE FOR EXPLANATION AND DETAILS ARE PROVIDED ON PAGE 3.				
1.	ARE YOU A CITIZEN OF THE UNITED STATES?				
	IF NATURALIZED GIVE DATE, PLACE AND NATURALIZATION NUMBER:				
2.	HAVE YOU EVER USED OR BEEN KNOWN BY ANOTHER NAME? IF YES PROVIDE NAME AND EXPLAIN:				
3.	WHAT IS YOUR AGE?* *YOU MUST BE 21 YEARS OF AGE TO APPLY FOR A LICENSE TO CARR' FIREARMS, 18 YEARS OF AGE* TO APPLY FOR A FIREARMS IDENTIFICATION CARD. * 15 YEARS OF AGE BULESS THAN 18 YEARS OF AGE WITH SUBMISSION OF A CERTIFICATE FROM PARENT OR GUARDIA' GRANTING PERMISSION TO APPLY FOR A FIREARMS IDENTIFICATION CARD.				
4.	HAVE YOU EVER BEEN CONVICTED OF A FELONY?				
5.	HAVE YOU EVER BEEN CONVICTED OF THE UNLAWFUL USE, POSSESSION, OR SALE OF NARCOTIC OR HARMFUL DRUGS AS DEFINED IN M.G.L. c. 94C, § 1?				
6.	HAVE YOU EVER BEEN CONVICTED OF A CRIME PUNISHABLE BY INCARCERATION BY MORE THAN (1) ONE YEAR?				
7.	. IN ANY STATE OR FEDERAL JURISDICTION HAVE YOU EVER BEEN CONVICTED AS AN ADULT O ADJUDICATED A YOUTHFUL OFFENDER OR DELINQUENT CHILD FOR THE COMMISSION OF (a) A FELONY (b) A MISDEMEANOR PUNISHABLE BY IMPRISONMENT FOR MORE THAN 2 YEARS; (c) A VIOLENT CRIME A DEFINED IN M.G.L. c. 140, § 121; (d) A VIOLATION OF ANY LAW REGULATING THE USE, POSSESSION OWNERSHIP, SALE, TRANSFER, RENTAL, RECEIPT OR TRANSPORTATION OF WEAPONS OR AMMUNITION FO WHICH A TERM OF IMPRISONMENT MAY BE IMPOSED; OR (e) A VIOLATION OF ANY LAW REGULATING TH USE, POSSESSION OR SALE OF CONTROLLED SUBSTANCES AS DEFINED IN M.G.L. c. 94, § 1?				
8.	HAVE YOU EVER BEEN CONFINED TO ANY HOSPITAL OR INSTITUTION FOR MENTAL ILLNESS?				
9.	ARE YOU OR HAVE YOU EVER BEEN UNDER TREATMENT FOR OR CONFINEMENT FOR DRUG ADDICTION OR HABITUAL DRUNKENNESS?				
10.	HAVE YOU EVER APPEARED IN ANY COURT AS A DEFENDANT FOR ANY CRIMINAL OFFENSE (EXCLUDING NON-CRIMINAL TRAFFIC OFFENSES)?				
11.	ARE YOU NOW UNDER ANY CHARGE(S) FOR ANY OFFENSE(S) AGAINST THE LAW?				
12.	ARE YOU NOW OR HAVE YOU EVER BEEN THE SUBJECT OF A M.G.L. c. 209A RESTRAINING ORDER OR INVOLVED IN A DOMESTIC VIOLENCE CHARGE?				
13.	HAS ANY LICENSE TO CARRY FIREARMS, PERMIT TO POSSESS FIREARMS, OR FIREARMS IDENTIFICATION CARD ISSUED TO YOU UNDER THE LAWS OF ANY STATE, TERRITORY OR JURISDICTION EVER BEEN SUSPENDED, REVOKED OR DENIED?				
14.	ARE YOU CURRENTLY THE SUBJECT OF ANY OUTSTANDING ARREST WARRANT IN ANY STATE OR FEDERAL JURISDICTION?				

Page 3 of 4

NAME	DOB:	
	TO ANY OF THE QUESTIONS FOUR THROUGH FOURTEEN, GIVE DETAILS WHICH MUSTANCES AND LOCATION:	JST
(IF NECESSARY USE SEPA	ATE SHEET OF PAPER TO COMPLETE)	
OTHER THAN MASSACHU	ETTS, WHAT OTHER STATE, TERRITORY OR JURISDICTION HAVE YOU RESIDED IN	?
HAVE YOU EVER HELD A IF "YES", WHEN, WHERE A	ICENSE TO CARRY IN ANY OTHER STATE, TERRITORY OR JURISDICTION?ND LICENSE NUMBER:	
LIST NAME AND ADDE IDENTIFICATION CARD):	ESSES OF TWO REFERENCES (NOT REQUIRED IF APPLYING FOR A FIREA	RMS
1		
2		
REASON (S) FOR REQUEST	NG THE ISSUANCE OF CARD OR LICENSE:	

Continued in the reverse side (page 4)

CHANGE OF ADDRESS NOTIFICATION REQUIREMENTS:

MASSACHUSETTS GENERAL LAW REQUIRES THAT:

ANY LICENSEE SHALL NOTIFY, IN WRITING, THE LICENSING AUTHORITY WHO ISSUED SAID LICENSE, THE CHIEF OF POLICE INTO WHOSE JURISDICTION THE LICENSEE MOVES AND THE EXECUTIVE DIRECTOR OF THE CRIMINAL HISTORY SYSTEMS BOARD OF ANY CHANGE OF ADDRESS. SUCH NOTIFICATION SHALL BE MADE BY CERTIFIED MAIL WITHIN 30 DAYS OF ITS OCCURRENCE. FAILURE TO SO NOTIFY SHALL BE CAUSE FOR REVOCATION OR SUSPENSION OF SAID LICENSE (M.G.L. c.140, § 131 (I).

A CARDHOLDER SHALL NOTIFY, IN WRITING, THE LICENSING AUTHORITY THAT ISSUED SUCH CARD, THE CHIEF OF POLICE INTO WHOSE JURISDICTION SUCH CARDHOLDER MOVES AND THE EXECUTIVE DIRECTOR OF THE CRIMINAL HISTORY SYSTEMS BOARD OF ANY CHANGE OF ADDRESS. SUCH NOTIFICATION SHALL BE MADE BY CERTIFIED MAIL WITHIN 30 DAYS OF ITS OCCURRENCE. FAILURE TO SO NOTIFY SHALL BE CAUSE FOR REVOCATION OR SUSPENSION OF SUCH CARD (M.G.L. c.140, § 129B (11).

I DECLARE THE ABOVE FACTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT ANY FALSE ANSWER(S) WILL BE JUST CAUSE FOR DENIAL OR REVOCATION OF MY LICENSE TO CARRY FIREARMS AND MAY BE USED IN A CRIMINAL PROCEEDING PURSUANT TO M.G.L c. 140, §§ 129 AND 131.

SIGNED UNDER THE PENALTIES OF PERJURY THIS	DAY OF		
	(DAY)	(MONTH)	(YEAR)
SIGNATURE OF APPLICANT			
SIGNATURE OF AFFLICANT			

APPLICANT: BRING TO YOUR LOCAL LICENSING AUTHORITY (POLICE DEPARTMENT). <u>DO NOT MAIL THE FIREARMS RECORD BUREAU</u>.

LICENSING AUTHORITY (LOCAL POLICE DEPARTMENT:

PLEASE RETAIN ONE COPY FOR YOUR FILES, FORWARD ONE COPY TO THE FIREARMS RECORD BUREAU WITH THE COMPLETED LTC/FID OR MG LICENSE FOR DATA ENTRY AND ONE COPY TO THE MASS STATE POLICE WITH THE APPLICANT'S FINGERPRINT CARD (FINGERPRINT CARD REQUIRED FOR NEW APPLICANT, ONLY) FOR APPROPRIATE FINGERPRINT SUPPORTED CRIMINAL RECORD CHECK.